

**SAN LUIS OBISPO COUNTY**  
**PROBATION DEPARTMENT**

Automatic Payment Plan Enrollment

Pay your Probation Payment Automatically • Save Postage • Never Pay Late Fee

To enroll in this free, efficient and secure way to pay your Probation payments, simply fill out the form and mail it to: **Probation Department, 2176 Johnson Avenue, County Government Center, San Luis Obispo, CA 93408, Attention Cashier.** Please mail this form with your next payment or in a payment envelope. You will continue to receive your monthly statement in the mail that tells you the amount due. Your automatic deductions should begin with your next billing statement (after receiving your authorization). Just in case, keep paying your bill until your statement reflects that you are set up for automatic payments. After that, you will not need to send another check. Please be advised that your account will be charged/debited the 1st of each month (or the 1st business day if the 1st lands on a holiday or weekend). **If payment made by a 3rd party, attach copy of 3rd party's driver's license for authorization & varification purposes.** Still have questions? Call Collections at 805.781.4174.

**ACTION TYPE**    ☐ **New Auto**                      ☐ **Terminate Auto Pay**                      ☐ **Change Auto Pay**

**DEFENDANT INFORMATION**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Probation Case #:** \_\_\_\_\_

**PAYMENT INFORMATION - PLEASE PRINT INFORMATION BELOW**

**CREDIT CARD INFORMATION**

**Credit Card Member First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Credit Card Type:** ° Visa ° MasterCard ° Discover      **Monthly Payment Amount:** \$ \_\_\_\_\_

**Credit Card #:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_ **Card Security Code:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_

**Billing Tel #:**      (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

If you want to have your bank / credit union set up automatic payments to the Probation Department through your checking account, please go on-line with your bank / credit union and follow their prompts to set up this feature.

*I want to enroll in the Automatic Payment Plan. My signature below authorizes the County of San Luis Obispo Probation Department to debit/charge my account/credit card as indicated above. This authorization will remain in effect until the County of San Luis Obispo Probation Department receives a new written authorization indicating a change in status OR the bill has been paid in full, whichever comes first.*

**Authorized Signature of**  
**Account/Credit Cardholder:** \_\_\_\_\_

**Date:** \_\_\_\_\_